

MENTAL HEALTH UPDATE October 7, 2009

We Need Your Help!

Do you have a new idea or possible topic for this "Banner" section of the Update? If so, we'd be interested in hearing about them! Please send any ideas or suggestions to Trish Palmer at tpalmer@vdh.state.vt.us

October 2nd Seminar on Law, Neuroscience and Mental Health

On October 2nd, The UVM College of Medicine and Vermont Law School, with support from The MacArthur Foundation Law and Neuroscience Project, jointly sponsored a program entitled *Seminar on Law, Neuroscience and Mental Health*.

Led by Dr. Tom Simpatico, Director of Public Psychiatry at UVM College of Medicine and Professor Oliver Goodenough at Vermont Law School, the program was a joint offering of these two institutions to offer Vermont legislators a briefing on current knowledge on very challenging issues. The Seminar presented the latest neuroscience, legal and social policy research and stimulated discussion to help legislators consider how this evidence measures up against the Vermont mental health statutes.

The Seminar was particularly timely in light of the large deployment of National Guard troops Vermont is preparing to send abroad, and the increase in mental illness, substance abuse and traumatic brain injuries that can be expected to result.

MINDS ON THE EDGE: Facing Mental Illness on VT Public Television (VPT) and Public Forums in October

MINDS ON THE EDGE: Facing Mental Illness will premiere on Vermont Public Television on Tuesday, October 6 at 10 p.m. with a repeat airing on Sunday, October 10 at 5 p.m. In conjunction with the premiere, VPT has joined as a media partner in a statewide effort to stimulate a citizen conversation about improving mental health services. The goals are to provide information on the issues, promote civic engagement, and report on a statewide dialogue that will unfold this month. VPT will devote the October 29th edition of Vermont Public Square to mental health, as well as other reporting on their air and website.

Legislator/Citizen Meetings in 4-6 Vermont Cities During October

Spearheaded by the Vermont chapter of the National Alliance for Mental Illness, in partnership with other statewide associations including the Vermont Nurses Association, a series of Legislator/Citizen meetings will be held throughout the state. The plan is that

legislators and citizens informed by the broadcast of *MINDS ON THE EDGE* and other media coverage will be able to come together for a civic dialogue to formulate state priorities to support the mental health needs of individuals, families and veterans.

Scheduled meetings include:

- October 13th from 7-9 PM: Frederick H. Tuttle Middle School Library, South Burlington, VT
- October 14th from 7-9 PM: Counseling Service of Addison County, Middlebury, VT
- October 19th from 6:30-9 PM: Kellogg-Hubbard Library, Montpelier, VT
- October 22nd from 7-9 PM: Shelburne Town Municipal Building, Shelburne, VT
- October 26th from 6-8 PM: Bennington Free Library, Bennington, VT

Please consider taking part in a meeting already scheduled, or initiating one in your district for late October.

ADULT MENTAL HEALTH & FUTURES

Homelessness Prevention & Rapid Re-Housing Projects

Designated Agency (DA) Housing Staff recently met to learn more about new, local, homeless prevention & rapid re-housing projects (HPRP) across the state. Mr. Scott Johnson, AHS Field Service Director, discussed projects funded across the state, the new HUD resources being made available, and information on coordinating DA housing staff with the HPRP grantees in local Continuums of Care. In addition, Ms. Kathleen Berk, of the Vermont State Housing Authority (VSHA), provided updates on housing programs, and announced the State Housing Authority will re-open its Section 8 waiting list on October 1st. Mr. Daniel Blankenship also of VSHA, detailed the HUD McKinney Vento competition now underway.

DMH Recognizes Northeast Kingdom Human Services CARE Bed Staff

On September 27, 2009, Northeast Kingdom Human Services crisis staff assessed someone in their community to need inpatient involuntary hospital level of care. The person was put on Emergency Examination status. There were no beds available at any of the five Designated Hospital inpatient psychiatric units, or bed availability at the Vermont State Hospital.

Instead of having the person wait in the local Emergency Room while a bed was located, a decision was made for the person to be transferred from the local Emergency Room into Northeast Kingdom Human Services CARE Bed program which is the agency's two-bed mental health crisis program. The staff at the CARE Bed worked with this person for three days and the client was successfully discharged from the program. DMH wants to publicly thank and recognize all of the staff members who were involved with this admission and the agency as a whole in their flexibility, creativity, and caring attitude in stepping up to meet the needs of this person in crisis.

Futures: Joint Fiscal and Treasurer's Office Issue Report

The 2010 Capital bill required that "no later than October 1, 2009, the treasurer's office and joint fiscal office shall provide a report to the mental health oversight committee and the joint fiscal committee describing the financing arrangement for a new psychiatric

wing at RRMC and the results of the accounting and financial analysis, including their conclusions as to whether the financing arrangement is reasonably feasible."

The report concludes ". . . we believe that the financing arrangement <u>is</u> reasonably feasible. We conclude that the Department of Mental Health (DMH), in conjunction with other State entities and RRMC, should continue working to develop an executable financing arrangement. However, we do not believe that a financing arrangement of this type could be executed today given current financial market conditions, the uncertainty created by Federal health care reform legislation, and without addressing several business considerations and risk factors that have been identified by the financial community. Further, any such financial arrangement may require modifications that are generally consistent with the original objectives of this proposal, to improve ultimate marketability and likelihood of success.

Treasurer's Office and Joint Fiscal Office recommend:

- 1. First, that the Legislative Committees approve continued expenditure authority to allow that the Department of Mental Health (DMH), in conjunction with other State entities and RRMC, should continue working to develop an executable financing arrangement with the interested bank (or other prospective financial institutions); and
- 2. Second, that the Legislative Committees and the parties be aware that the final financing arrangement might require some modifications of the terms and the specific requirements that the State and the RRMC desire.

In addition, the Joint Fiscal Office recognizes that this financing effort is part of a broader initiative to address the State's mental health care needs. All parties must understand that these needs will not be addressed by this project alone. The department needs to pursue this as part of a broader mental health service plan to be developed with legislative review.

The full report and accompanying analysis is posted on the DMH web site http://mentalhealth.vermont.gov/report#futures

Review Committee Offers Recommendations on Futures Master Plan Development A review committee comprised of legislators, service providers, advocates, and consumer and family members met to offer their assessments of the hospital proposals and additional information provided at their request. Overall recommendations to the Commissioner follow for each proposal.

Brattleboro Retreat: the committee recommends continued planning work with the Retreat especially to resolve the IMD issues. The Retreat was generally viewed as clinically strong enough to provide VSH replacement services although the location poses issues to geographic accessibility.

Dartmouth Medical School: the committee unanimously recommended exploration of the conceptual proposal to create a newly constructed program on the White River Junction Veterans Hospital campus in collaboration with Dartmouth Hitchcock Medical Center

FAHC: the committee discussed the importance of locating new psychiatric inpatient services in Chittenden County however the proposed timelines for planning (beginning in 2014) and the conceptual nature of the proposal make more specific recommendations difficult to develop at this time.

Springfield Hospital: the committee appreciated the "system of care" approach taken in this proposal and commented on the strengths of the current services of the Windham Center. They recommend continued planning especially focused on opportunities to develop the broader system of care in partnership with Springfield Hospital.

Rutland Regional Medical Center: committee members were divided on whether or not continued planning and development work should occur with RRMC. Concerns about the program's past responsiveness to mental health needs and ability to recruit and retain the requisite medical leadership were specifically discussed. Appreciation that RRMC has been a consistent planning partner and offered a more detailed response to the RFP was also noted. Finally concerns about the capital costs of the project being born solely by the State were raised.

<u>Care Management Committee Notes from September meeting are posted at http://mentalhealth.vermont.gov/sites/dmh/files/FuturesCareMgmt/REP_STEERING_NOTES 09 14.pdf</u>

VISI Peer Conference A Success

The 4th Annual VISI Peer Conference, "Walk a Mile in My Shoes: Moving Toward a Peer-Driven Recovery-Oriented System of Care" was held on September 25th, 2009 at the Snowshed Lodge at the Killington Resort. Over 100 people were in attendance to listen to the two keynote speakers: Phil Valentine and Moe Armstrong. Phil Valentine is the Executive Director for the Connecticut Community for Addiction Recovery (CCAR). In 2006 he was recognized for his work in the recovery community by the Johnson Institute with an America Honors Recovery award. Currently, he is spearheading CCAR's effort to build a statewide network of Recovery Community Centers that feature many innovative peer recovery support services like Telephone Recovery Support and All-Recovery Groups. Moe Armstrong is the creator of the Peer Educators Project, which provides discussion/support/learning groups among people who experience psychiatric disabilities. He received the Special Achievement and Outstanding Contributions in Psychological Rehabilitation Awards from the American Psychological Association in 2006 and NAMI's prestigious Lionel Aldridge Award. People from around the state came to hear workshops that discussed Peer Support within the Veterans Community; The Role of Medications in Recovery; Mental Illness Anonymous (MIA) Peer Support for People with Co Occurring Conditions; Telephone Recovery Support Program and Recovery Coaching; Peer Support, Recovery and the Family Perspective; and about The Storyboard Exhibit: Exploring the Role of Art in Recovery.

VISI Forum

The VISI Forum is scheduled to take place on October 30th, 2009 at the Chapel Conference Room, Vermont College, Montpelier from 9:30 until 12:30. All are welcome to join this quarterly forum meeting to participate in the discussion about integrating mental health and substance abuse services. For more information and to RSVP, contact Patty Breneman at pbrenem@vdh.state.vt.us or 652.2033.

VISI Case Consultation

The next VISI Case Consultation call will be on October 14th from 12:00pm until 1:00pm via conference call. This is a venue in which a case is presented with a panel of local experts as well as providers in the field can learn ways to better serve individuals with complex needs. If you're interested in joining this call, please contact Patty Breneman at pbrenem@vdh.state.vt.us or 652.2033.

VISI Employee Receives Director's Award

Patty Breneman received a Director's award by the Vermont Department of Health, Division of Alcohol and Drug Abuse Services for her efforts in support of substance abuse and co-occurring services. The award was presented by Barbara Cimaglio, Deputy Commissioner at the Valley Vista 4th Annual Addictions Conference at Lake Morey Resort on October 1, 2009. Patty was nominated by Mike Tipton, an ADAP Program Coordinator for the excellent work she has been doing to further the efforts of the state's peer programs. Letters of support for her nomination came from several peer support organizations who spoke highly of Patty's empathetic, organized and responsive style. She was recognized for her collaborative spirit and her commitment to the mission of the Vermont Integrated Services Initiative.

<u>Successful Training on Supported Employment for Individuals with Psychiatric Disabilities and Substance Abuse</u>

The second regional training on Supported Employment for people with co-occurring disorders took place in Randolph, Vermont on October 1-2, 2009. The training event began with opening remarks from the Adult Director of Mental Health, Trish Singer. She acknowledged the excellent work of the provider community, emphasized the importance of an ongoing commitment to best practices and to collaborating with consumers on their recovery journey. The participants came with a mix of experience from a variety of backgrounds including employment staff from mental health agencies, counselors from Vocational Rehabilitation, and peer staff.

Amy Gelb and Rick Kugler from the Technical Assistance and Continuing Education (TACE) Center of New England presented the bulk of the information with Laura Flint from the Department of Mental Health providing a section on Evidence-Based Supported Employment principles and practice. The topics that resulted in the most discussion included the benefits of paid, competitive employment versus volunteering, disclosing one's disability or substance abuse, and how to be successful at job development in the community. Participants actually practiced job development in the local community as part of the training.

The training was made possible through an ongoing collaboration between the TACE Center of New England, Vocational Rehabilitation, and the Department of Mental Health. A special thank you to Voc Rehab for providing the site, audio system, and administrative assistance that contributed to the success of the event.

Local Peer-Operated Projects Apply for DMH Funding

The Department of Mental Health (DMH) and Vermont Psychiatric Survivors recently reviewed applications from local peer groups through the *Peer-Operated Projects* funding program to support independent peer-run initiatives for CRT consumers. Through this initiative, DMH funds local projects that are designed and operated by individuals with the lived experience of mental illness. Examples of the kinds of activities funded through this program include:

- Education in peer leadership (e.g., teaching individuals how to advocate for themselves)
- Warm lines
- Community Education about mental illness
- Peer mentoring
- Drop-in centers
- Peer crisis diversion
- Resources for peers upon discharge from inpatient hospitalization or from a correctional facility
- Peer advocacy/community liaisons

For more information about this funding program and the projects currently being funded, contact Linda Corey, Vermont Psychiatric Survivors, 1-800-564-2106, or Nick Nichols at 652-2000 or nick.nichols@ahs.state.vt.us.

DMH to Re-Apply for Federal TTI Funding

DMH will be re-applying for grant funds through the Substance Abuse and Mental Health Services Administration (SAMHSA) Transformation Transfer Initiative (TTI). The TTI provides, on a competitive basis, modest funding awards (\$221,000 over 12 months) to States, the District of Columbia, and the Territories not participating in the Mental Health Transformation State Incentive Grant (T-SIG) program to identify, adopt, and strengthen transformation initiatives and activities that can be implemented in the State, either through a new initiative or expansion of one already underway, and can focus on one or multiple phases of system change. DMH plans to update and resubmit its TTI application from last year, which focused on implementing recommendations from Gayle Bluebird, a national expert on peer support/services, regarding the enhancement of peer support and involvement in Vermont.

Questions/input re: this application can be directed to Nick Nichols at 652-2000 or nick.nichols@ahs.state.vt.us.

Vermont Peer Becomes State's First Certified Peer Specialist

Congratulations to Kathryn—better known as Kitty—Gallagher of Rutland upon completion of training to be a peer specialist and receiving her certification this summer. To obtain her certificate, Kitty took an online course for several weeks and then attended classes for a three-day intensive training at the annual conference of the National Association of Peer Specialists in Phoenix, Arizona, in August. Both training series are sponsored by Recovery Innovations, Inc., of Arizona, a nonprofit corporation accredited by the Joint Commission on Accreditation of Healthcare Organizations. Recovery Innovations promotes advanced peer practices. Kitty is the first consumer from Vermont to complete peer specialist training. Although peer specialists cannot currently be compensated with funds from Medicaid for providing mental health and recovery services in Vermont, Kitty hopes that that situation will soon change and that more certified peer specialists will be recognized for their work with their peers.

<u>Members of the Supported Employment Family Partnership Initiative Invited to</u> Speak at NAMI-VT Conference

The Supported Employment (SE) Family Partnership Initiative is thrilled to be invited to give a presentation during lunch at the statewide conference sponsored by the National Alliance on Mental Illness – Vermont (NAMI-VT) on November 6 & 7, 2009. The opportunity to share information with mental health providers and family members about how to include family members in the supported employment process and the reasons this has a positive impact on recovery is a most welcome opportunity. In addition to the presentation, the SE Family Partnership Initiative will have a display table with supplementary information.

The family team consists of family members along with individuals from the Department of Mental Health, Division of Vocational Rehabilitation, and NAMI-VT. The team members recently met on October 6, 2009 to plan for this event. Upcoming meetings will be held on October 20th from 9:00 – 11:00am at the Department of Mental Health at 108 Cherry Street in Burlington, VT and October 28th from 1:30 – 3:30pm at Vocational Rehabilitation in Waterbury, VT. If interested in joining this initiative, please contact Laura Flint at (802) 652-2000 or email laura.flint@ahs.state.vt.us.

The Supported Employment (SE) Family Partnership Initiative is in its second year of a two-year grant. The goals of the project are to increase family advocacy efforts in promoting employment as a key part of recovery from mental illness and strengthening the partnerships between providers, family members, and consumers around supported employment services.

CHILDREN'S MENTAL HEALTH

<u>DMH Awarded SAMHSA Grant to Promote Effective Trauma Treatment for Children, Adolescents and Families</u>

The Vermont Department of Mental Health has received notification of award of grant funding for the Substance Abuse and Mental Health Services Administration's Center for Mental Health Services, National Child Traumatic Stress Initiative (NCTSI), Community Treatment and Services Center grant. The grant award is just under \$400,000 annually for up to 3 years. The purpose of the SAMHSA Initiative is to improve treatment and services for children and adolescents in the U.S. who have experienced traumatic events. The initiative is designed to address child trauma issues by creating a national network of grantees—the National Child Traumatic Stress Network. Network members will work collaboratively to develop and promote effective community practices for children and adolescents exposed to a wide array of traumatic events.

With this award, the Vermont Department of Mental Health (DMH) will establish the **Vermont Child Trauma Collaborative** to implement and sustain the <u>A</u>ttachment, Self-Regulation and Competency (ARC) Framework in Vermont's community mental health system to change the standard of practice so that:

- 1. children in Vermont have access to trauma-informed services in the system of care;
- 2. children who screen positively for trauma receive a standardized trauma assessment; and

3. children with complex trauma and their families are referred for and receive empirically-based trauma treatment services.

The Vermont Child Trauma Collaborative (VCTC) will focus for intervention on children ages 3-18 who have experienced complex trauma, multiple and/or chronic exposure to developmentally adverse interpersonal victimization, and their families. The VCTC will consult with The Trauma Center at Justice Resource Institute in Massachusetts, an original member of the National Child Traumatic Stress Network (NCTSN), for the statewide dissemination of ARC. ARC is an empirically based framework recognized by the NCTSN as a promising practice for addressing the developmental and relational vulnerabilities of children and families who have experienced complex trauma. DMH will be collaborating with key stakeholders in the children's system of care, including public and private community mental health providers, the Department for Children and Families' Family Services Division, the Department of Education and local schools, the Vermont Federation of Families for Children's Mental Health, and the Vermont Network Against Domestic and Sexual Violence.

Standardized Assessment in Child and Youth Mental Health

On September 21st and 28th two day-long training conferences were held to introduce and discuss the need for standardized assessments for children, youth and their families. The Department of Mental Health hosted the events with added sponsorship from the Vermont Center for Children, Youth and Families; the Vermont Federation of Families for Children's Mental Health; the Vermont Child Health Improvement Program (VCHIP); and the Youth in Transition (YIT) grant. The intent was to give a broad overview of the usefulness and ethics in using standardized assessments and to review three specific assessment tools that are relevant in mental health treatment for children and adolescents. The Achenbach System of Empirically Based Assessment, the Trauma Symptom Checklist for Children (two age versions) and the Parenting Stress Index (two age versions) were presented. The use of ongoing supervision, case presentations, and more detailed trainings on the implementation of specific standardized assessments will be needed in order to fully realize the potential benefit of such assessment tools to treatment planning, clinical supports, and treatment evaluation.

The next steps will involve more detailed exploration of how each agency will further use the tools. This may include programs that currently require their use (*e.g.*, Behavior Interventionist, SAMSHA funded grants), and agencies may want to expand their use in other programs.

<u>Vermont YIT Coordinator Chosen to Provide Input on National Training Curriculum</u>

Mercedes Avila, the Cultural and Linguistic Competence Coordinator for the Youth in Transition (YIT) Grant, has just been chosen as one of 25 people to win a highly-coveted and competitive opportunity to try out a new Training-of-Trainers (TOT) curriculum about Cultural and Linguistic Competence (CLC). The curriculum was developed by the National Alliance of Multi-Ethnic Behavioral Health Associations (NAMBHA), formed in 2003, which says its "principal members have worked together since 1989 when they comprised the multicultural committee at the Georgetown University Development Center and produced the seminal work that launched cultural competence in the mental health field, *Towards a Culturally Competent System of Care* (Cross, Bazron, Dennis, and Isaacs)."

Mercedes and the other members of the YIT Operations Team who attended the required SAMHSA grantees' meeting in Anaheim, California this summer were introduced to these founders of the cultural competence movement. Now Mercedes will have the chance to spend 4 days (October 13-16) working closely with them in Alexandria, Virginia to experience and give feedback on their pilot curriculum! In this way, she will be knowledgeable about the curriculum and able to offer it in Vermont without having to pay the registration and materials fees that people who want to be trainers in the future will have to pay.

This training project is one of a series of SAMHSA-funded activities to advance efforts to address mental health disparities under CMHS' Eliminating Mental Health Disparities (EMHD) Initiative. The primary purpose of the CLC-TOT curriculum is to provide training to cultural competence staff so that there is greater success in the implementation of, and results from, cultural and linguistic competence efforts in behavioral health organizations and systems.

VERMONT STATE HOSPTIAL

Treatment Mall "New Directions" Re-Opens

The Vermont State Hospital re-opened the treatment mall, the New Directions Pavillion earlier this month. This is a treatment area in a building separate from the patients' residential units, and is used to provide a wide range of treatment services. During treatment mall hours, patients are involved in group and individual activities, treatment plan meetings, and can meet with visitors or treatment team members. The treatment mall was closed late in 2008 due to safety concerns posed by CMS and renovations to address these concerns were completed in September

VERMONT STATE HOSPITAL CENSUS

The Vermont State Hospital Census was 49 as of midnight Monday. The average census for the past 45 days was 49.3.